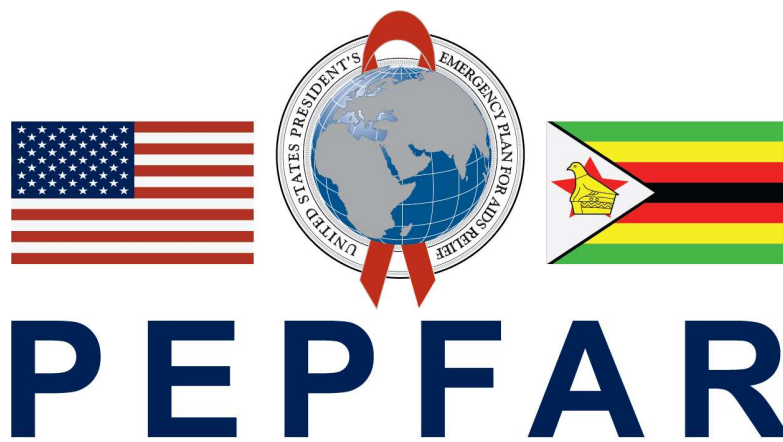


Raramo ineTariro nePEPFAR

Ukuphila Ethembeni ngePEPFAR (Ndebele translation)

Living Hopefully with PEPFAR (English translation)



U.S. President's Emergency Plan for AIDS Relief

October 2020

Greetings Everyone,

Welcome to the fourth edition of **Raramo ineTariro nePEPFAR**, the PEPFAR Zimbabwe e-newsletter. September is always an important month in the U.S. government calendar as it marks the end of the fiscal year. We all know that the past seven months have been challenging and have required us to think outside the box to continue providing health services to people living with HIV. We would like to thank you for your tireless efforts to complete most of the planned activities in this difficult and unpredictable environment. As we look forward to collecting and sharing PEPFAR quarter four (Q4) results, we can only hope that the lessons we learn will strengthen our programming as we dive into the implementation of the Country Operational Plan (COP 2020) which started on October 1st.

The United States Government requires an annual report of expenditures of PEPFAR programs at the end of each fiscal year. In this issue, we highlight some important dates and basic insights on expenditure reporting for our implementing partners, including a revised financial classification structure that provides more comprehensive, flexible, and transparent tracking of our investments. This important information is subsequently used to improve program planning.

Most partners have adapted well to the new world order of virtual working. In this issue, we share successful interventions on radio, Facebook, and television by Zim-TTECH, OPHID, and ZACH. Additionally, a USAID movie, "Shaina," premiered on national television and received great reviews. The good news is that if you missed out, you can still catch up through the links provided below.

As always, thank you for your contributions and continued support of this newsletter. If you have contributions for future editions, please submit them to our PEPFAR Communications Specialist, Gay Nyakwende (NyakwendeG@state.gov).

Stay safe! Always wear your mask and practice social distancing!

Best Wishes,

Kristine F. Clark
PEPFAR Country Coordinator

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“Shaina” Movie Delivers Powerful Health Messages



As part of a media initiative to empower adolescent girls and young women in Sub-Saharan Africa, the United States Agency for International Development (USAID), funded the production of the evocative feature-length film, “Shaina,” which premiered on ZBC-TV on August 21st and 23rd. USAID collaborated with high profile Zimbabwean actors and health partners to deliver a compelling story that documents challenges faced by adolescent girls and young women in Zimbabwe.

Through Shaina, USAID hopes to reach more than a million Zimbabweans with life-saving health messages on key issues such as poverty, pregnancy, maternal and child health, gender-based violence, malaria, and tuberculosis. The film is a must-see as it draws attention to the obstacles and violence young girls sadly shoulder every day as they seek to fulfill their dreams. Shaina also celebrates the acting skills and innovative nature of young Zimbabweans, even in the face of a challenging environment. There is so much to learn from this highly entertaining and educational movie so don’t miss out! Check out the social media accounts for the film and post about it using the hashtags #shainathemovie and #shaina2020.

-  ShainaTheMovie
-  @MovieShaina
-  @ShainaTheMovie
-  ShainaTheMovie

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ZIM-TTECH conducts successful outreach in Harare

The Zimbabwe Technical Assistance, Training, and Education Center for Health ([Zim-TTECH](#)) supports the improvement of clinical services and strengthening of health systems in Zimbabwe with support from PEPFAR and the U.S. Centers for Disease Control and Prevention (CDC). The health delivery system in Zimbabwe has been disrupted due to the industrial action by health personnel. The situation has been compounded by the advent of COVID-19, resulting in the closure of 27 health facilities in August run by the Harare City Council Health department due to severe shortages of health personnel. At one time, only 16 health facilities in Harare remained operational for HIV services, resulting in congestion and clients missing their booked appointments at health facilities. Some staff members who tested positive to COVID-19 had to self-isolate, further compromising the smooth and efficient delivery of health services especially for people living with HIV (PLHIV).



To respond to this challenge, and to ensure continuity of care for PLHIV, Zim-TTECH working with the City of Harare and the Zimbabwe Network of People Living with HIV (ZNNP+) and with guidance from the Ministry of Health and Child Care, launched outreach activities in Harare on August 17. Comprehensive HIV services inclusive of counseling, treatment re-supply, HIV testing and treatment initiation, tuberculosis preventive therapy (TPT), viral load testing, prophylaxis for HIV-exposed infants, PrEP, and condom distribution for those who normally received care at the closed facilities were availed. Additionally, critical resources from Zim-TTECH's [ZAZIC](#) program for voluntary medical male circumcision including outreach caravans and health care workers were utilized on this outreach. Mobilization of clients was done in partnership with PLHIV organizations. During the first three weeks, 5,000 PLHIV received treatment refills with the majority (64%) being females. Among the women who received re-supplies, 25 were pregnant and 92 were breastfeeding.





Outreach service delivery point using a Caravan

PEPFAR Implementing Partners
Launch New Messages of Hope



OPHID Director of Programs launching the FCI New messages of Hope at Cresta Lodge in Harare

OPHID and ZACH launched “New Messages of Hope” educational materials on September 23rd through a virtual roundtable discussion aired on the Zimbabwe Television Network. These materials were co-created by several Faith Communities Initiative (FCI) stakeholders including representatives of faith and community umbrella bodies, churches, government departments, beneficiaries of services, and service providers. Optimal collaboration is key in disseminating important and consistent health messages of hope. More information can be found [here](#).

PEPFAR, through USAID and CDC, is supporting FCI in Zimbabwe through the following implementing partners: OPHID, ZACH, Africaid, and FACT. The program seeks to identify people who have not routinely intersected with medical systems (e.g., boys, men, non-pregnant women, adolescents), in order to link them to health services. Reaching men at increased risk for HIV and inviting them for HIV testing, including self-testing, and linking and retaining those who test positive in treatment, is of critical importance as Zimbabwe nears epidemic control.



ZNNP+ Distributes Food Hampers to Ex-Prison Inmates in Harare

Story submitted by ZNNP+, Written by Clarence Mademutsa



Sample of Hampers Distributed to Ex-Inmates

In July, the Zimbabwe National Network of People Living with HIV (ZNNP+), in an effort to mitigate the impact of the COVID-19 pandemic, distributed food hampers to ex-inmates in Chitungwiza, Epworth, and other selected areas of Harare Province. This was done under the Prison Health Program supported by Southern Africa Network of Prisons (SANOP) and Voluntary Service Overseas (VSO). The COVID-19 pandemic has had an impact on most vulnerable groups, including ex-inmates. Most of them are not formally employed and face stigma and discrimination in their communities due to their past criminal records.

To mitigate the ex-inmates' vulnerability, ZNNP+ distributed 50 food hampers to 22 males and 28 females. The hampers were composed of one-kilogram washing soap, 500 grams of salt, two liters cooking oil, and ten kilograms of mealie meal.



Sample of Hampers Distributed to Ex-Inmates

The beneficiaries were also sensitized on COVID-19 risks and ways of preventing infection during the distribution.



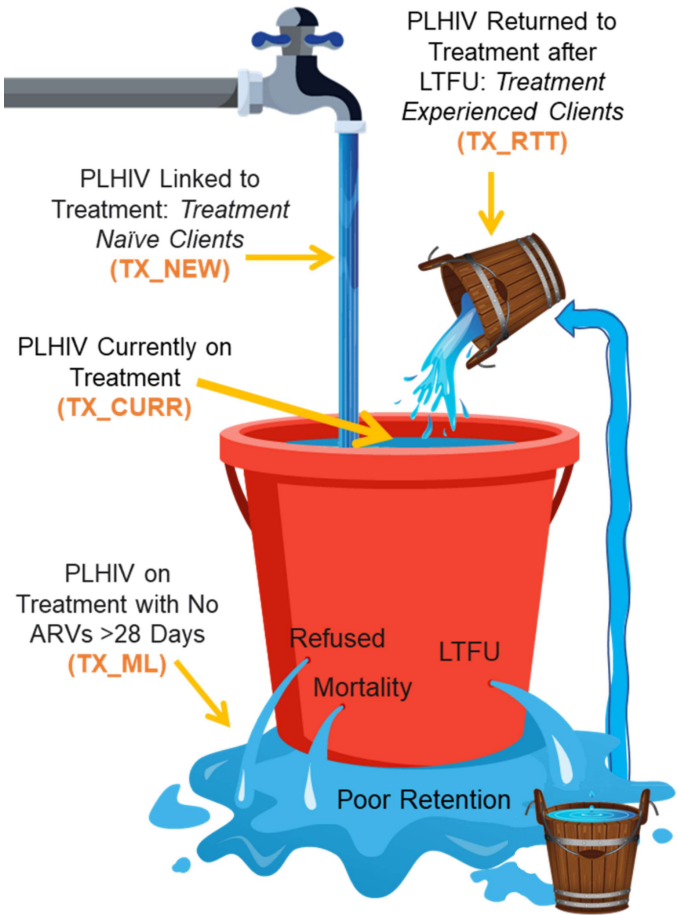
PEPFAR Partners Discuss Best Practices for Analyzing Retention of HIV Clients on ART

The PEPFAR approach to achieving epidemic control has taken a greater focus on data collection and the use of data to drive better programs. This semi-regular column called "Data-Driven" takes a closer look at Zimbabwe's data, performance indicators, monitoring tools, and other strategic information issues to try to make sense of it all. **PEPFAR appreciates that the data collected represents the millions of men, women, and children that we serve.**

As Zimbabwe approaches HIV epidemic control, the most significant goal for sustaining these gains is ensuring people living with HIV are retained on treatment. Tracking clients as they come in and out of the health system is at the forefront of PEPFAR's programming.

PEPFAR implementing partners met virtually on September 30 to review and discuss PEPFAR’s Monitoring, Evaluation, and Reporting (MER) indicators around the tracking of patients on HIV treatment. For the first time in quarter three of this year, PEPFAR partners successfully reported on national HIV treatment numbers instead of only reporting in areas where PEPFAR is providing direct financial support for service delivery. With this new requirement, PEPFAR strives to strengthen the national HIV program outside of the 44 districts where PEPFAR provides direct service delivery and gain insights into the additional 19 districts where roughly 20% of people living with HIV in Zimbabwe receive HIV treatment services.

During the meeting, the PEPFAR Coordination Office explained that treatment retention is tracked through a series of MER indicators including TX_CURR, TX_NEW, TX_NET_NEW, TX_ML, TX_PVLS, TX_RTT. If one imagines a running faucet as new HIV clients on treatment (TX_NEW), then the water collecting in a bucket below the faucet represents all PLHIV currently on treatment (TX_CURR). TX_NET_NEW helps assess how the total volume of patients currently on treatment (TX_CURR) changes from one time period to another. The leaky holes at the bottom of the bucket represent loss of clients – those who went off treatment, missed appointments, died, or were lost to follow up – essentially factors that make up poor retention. Additional indicators help us track the factors associated with patient loss including the reasons why clients are lost (TX_ML) and those who return to treatment (TX_RTT). Careful data collection and reporting will help us better understand treatment program growth or decline towards the attainment of the 95-95-95 goals.



Partners also discussed expectations around the monitoring of treatment results in the previously non-PEPFAR districts (central support or TA districts). The PEPFAR Coordination Office informed partners that this monitoring is not an expansion of PEPFAR services, and the monitoring and reporting of TA districts would be done in close collaboration with the Ministry of Health and Child Care (MOHCC) based on specific issues identified in the data.

Implementing partners will reconvene in the coming weeks to brainstorm ways to improve data use in program implementation and ways to standardize reporting of treatment data.



ZACH Rescues Girls from Child Marriages in Zvimba

Story submitted by CDC Implementing Partner, Zimbabwe Association of Church-Related Hospitals (ZACH); Written by Shamiso Yikoniko





The team that followed child sexual abuse cases with CCWs

In Zimbabwe, child marriages are illegal, yet an estimated 34 percent of girls are married by the time they are 18, according to UNICEF. Four girls between the ages of 13 and 14 were freed from child marriages and placed in safety thanks to efforts from the Zimbabwe Association of Church-related Hospitals (ZACH) in collaboration with the Zvimba District Department of Social Welfare.

Sadly, two of the girls were found to be pregnant before they were rescued from their marriages. A probation officer and a ZACH social worker conducting home visits in June facilitated medical examinations for the children which confirmed the pregnancies and also that all the girls had been sexually abused.

During home visits, the team from ZACH also found that families of both the underage brides and the grooms had agreed to payments for the marriage (traditionally called “lobola”). The ZACH social worker offered counseling to the survivors and raised awareness among families involved that it is criminal to pay or receive lobola for children under the age of 18 years.

The two pregnant minors were placed in a safe house where they are receiving ongoing psycho-social support. The other minors were placed under foster care. Police have so far arrested one of the four perpetrators in the child marriage case, but have not apprehended the other suspects.

Nevertheless, it is encouraging to note that the Child Care Workers (CCWs) in the district are working tirelessly to raise awareness and reporting of child sexual abuse cases.

Learn more about ZACH’s work through the following links:

- [Coaching Boys Into Men Session](#)
- [Protection Against Sexual Violence for Children during COVID 19 Lockdown](#)
- [Coaching Boys to Men Coach – Ndebele](#)
- [Sex is Consent Illustration](#)
- [Africa News Tonight Sexual Violence Interview](#)
- [Janet & the Pastor Short Film](#)

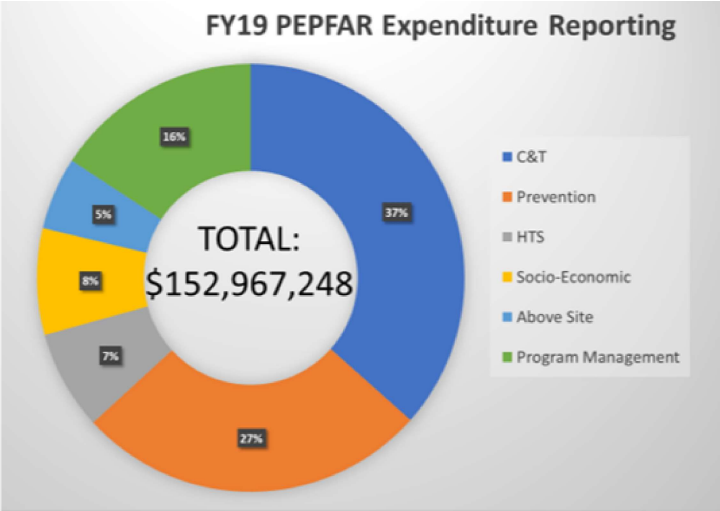


It’s Time for COP19 Expenditure Reporting

The United States Government (USG) requires an annual report of expenditures of PEPFAR programs at the end of each fiscal year (1 October–30 September). The purpose of this reporting is to better understand the costs the USG incurs to provide a broad range of HIV services and support and to subsequently use this information to improve program planning.

In FY2019 (COP18), PEPFAR Zimbabwe expended a total of **\$152 million** on HIV programs, including \$55.9 million (37%) on care and treatment and \$40.7

million (27%) on prevention programs. How do we know this? Through careful and detailed annual expenditure reporting (ER) from our implementing partners.



Now is the time for FY2020 (COP19) ER to begin. Starting on 1st October and ending 6th November, PEPFAR will open DATIM to allow partners to begin uploading their FY20 ER templates. The following is a quick overview of the important dates and what’s new for FY20 PEPFAR Program Expenditure Reporting:

Date	Upcoming Activities
Prior to 10/1	DATIM expenditure reporting users request new accounts or reactivate expired accounts as needed
10/1	DATIM open for IP upload of FY2020 IM expenditure reporting Excel templates
11/6	FY2020 expenditure reporting data entry import deadline - upload and submit ER templates in DATIM for approval by Agency field staff AOR/COR/Project Officer
11/13	FY2020 expenditure reporting DATIM data entry close; all templates should have been submitted by IPs and approved by Agency field staff
12/1	DATIM open for IP cleaning and re-upload of FY2020 IM expenditure reporting
12/11	FY2020 expenditure reporting data cleaning import deadline; all cleaned expenditure reporting templates should be submitted by IPs and approved by Agency field staff
12/18	FY2020 expenditure reporting data cleaning period closes

New for FY20 expenditure reporting

Financial Classifications: New in FY2020 expenditure reporting are the addition of new cost categories that provide additional detail around healthcare workers, which were previously listed as one cost category under personnel, and one cost category under contractual. The new cost categories are:

- Personnel: Salaries- Health Care Workers- Clinical
- Personnel: Salaries- Health Care Workers- Ancillary
- Contractual: Contracted Health Care Workers- Clinical
- Contractual: Contracted Health Care Workers- Ancillary

Definitions of these and of all PEPFAR financial classifications, as well as examples, exclusions, and other guidance can be found in the [PEPFAR Financial Classifications Reference Guide](#).

ERB Processor App Used for Data Entry in DATIM: New in FY20, IP users will submit templates in DATIM through the ERB Processor app, instead of through the Data Entry app. To submit templates, users will navigate to the ERB Processor app in the app menu in DATIM, and then will be prompted to enter some basic information about their mechanism and then will upload the template. Data approval will still be done in the Data Approval App, which is a separate app from the ERB Processor App.

More information on What’s New in FY20 expenditure reporting can be found [here](#), and the FY20 expenditure reporting template can be downloaded [here](#). A link to the overall guidance on Monitoring PEPFAR Program Expenditures (Version 2.0) can be found [here](#).



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